

FORDEN RURAL DISTRICT COUNCIL.

ANNUAL REPORT

of the
MEDICAL OFFICER OF HEALTH

for the year 1961

Chairman - Councillor T.P. Bowen.
Vice-Chairman - Councillor E.D. Evans.

Councillors - T.W. Bayliss,
W.L. Bolderston,
D. Bore,
G.H. Bowen,
J.D. Bowen,
T.E. Davies,
G.E. Edwards,
R.T. Ferrier-Jones,
T.G. Francis,
D.C. Jones,
T.E. Jones,
W.W. Jones,
H. Parry,
S.G. Pritchard,
B.H. Puckle,
E.O. Ralph,
J.E. Vaughan.



Clerk of the Council. E.J. Lloyd A.C.C.S. to 31st August and
Norman O. Davies A.C.C.S. from 1st September.

Medical Officer of Health, Elinor M. Greville M.R.C.S., L.R.C.P. D.P.H.

Surveyor and Public Health Inspector - H.J. Sleight.

Chief Financial Officer. - G.H. Greenhouse.

To the Chairman and Members of the Forden Rural District Council.

Mr. Chairman, Gentlemen,

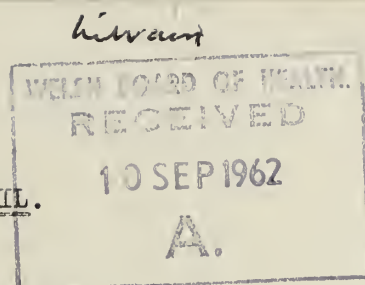
I have pleasure in submitting the Annual Report for the year ending 31st Dember 1961,

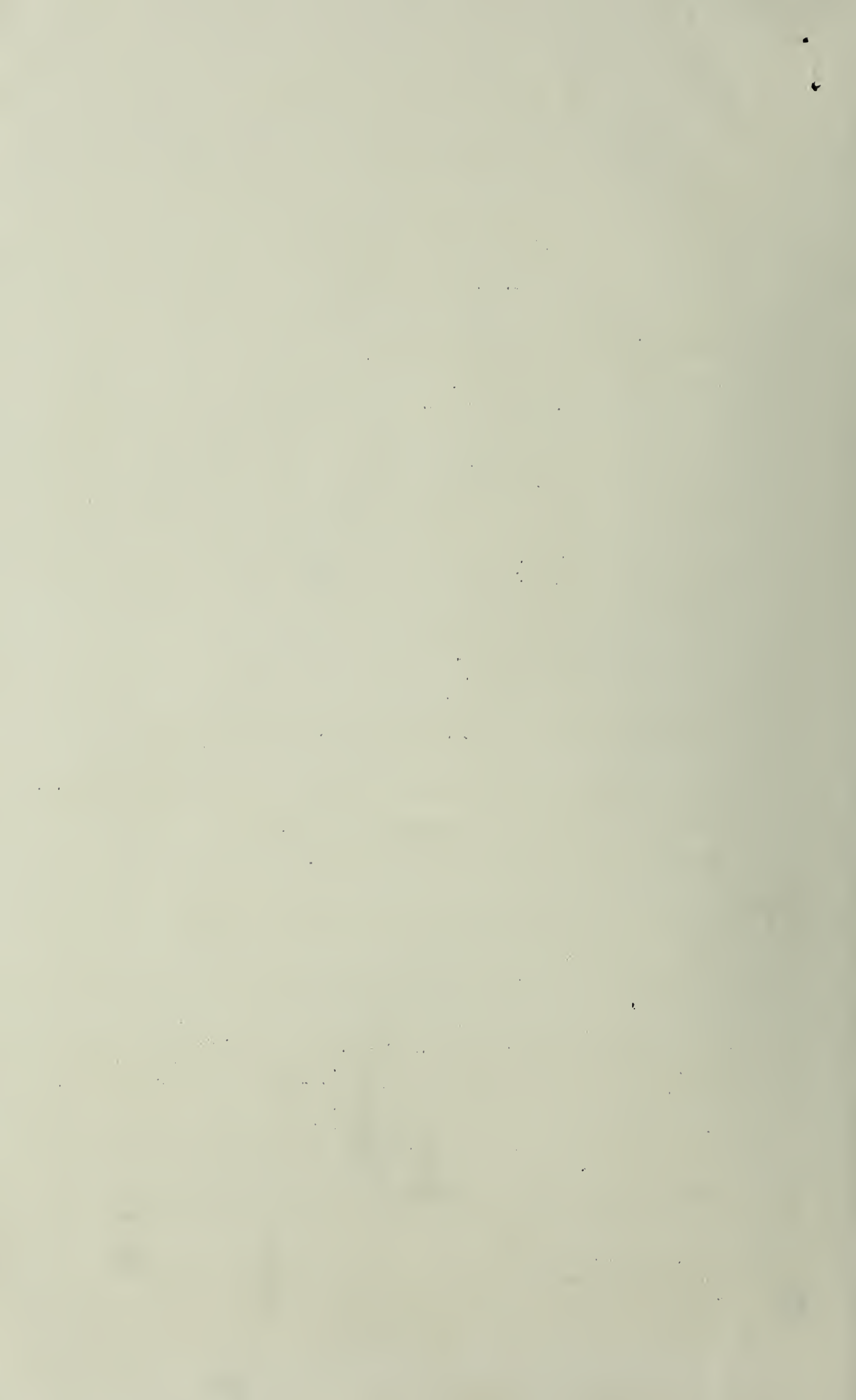
In some respects the statistics of the area compare favourably with those for the county and for England and Wales, viz; the Birth Rate is higher than and the Death Rate is lower than the comparable figures for the county and the country as a whole, but even so the local population has declined in spite of a natural increase (births over deaths). There can be only one reason for this, namely the exodus of the younger working members of the population to more industrialized areas, in the absence of sufficient industry to absorb them in this district.

The Stillbirth Rate remains much the same and shares, together with the Perinatal Mortality Rate a high figure, experienced generally in the country. These rates are discussed fully in the body of the report.

The chief causes of death were from diseases of the central nervous system and Heart Disease ; 50% of deaths from heart disease being attributable coronary disease. Roughly 50% of cancer deaths were from cancer of the stomach, but notably deaths from cancer of the lung were conspicuous by their absence. Deaths from cancer of the lung in the whole country accounted for

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36% of all deaths, and deaths from cancer in England and Wales in 1961 increased once more. It is therefore obvious that this is no time for complacency. The report of the Royal College of Physicians on "Smoking and Health" should remind us that it has been proved that smoking is a cause of lung cancer and bronchitis and may contribute to the development of coronary heart disease. The report recommends further education of the public and especially school children, concerning the hazards of smoking. Publicity material is being prepared, free of charge, and the Central Council for Health Education has arranged a convincing publicity campaign to be launched in the Autumn of 1962.

The absolute necessity to extend the existing water supplies to enable progress to be made in slum clearance and housing development has in the past been stressed, and I will continue to impress upon the Council's representatives on the Water Board the urgency with which this matter should be approached. Extension of sewerage schemes will be of necessity handicapped by the lack of water supplies; nevertheless, it is gratifying to note that progress was made during the year to sewer the Village of Berriew.

Although the Council did not erect any new houses during 1961, it is pleasing that 21 old houses were improved by either informal action by the Local Authority or their officers, or by Grants. In addition, 5 houses were built by private enterprise.

Infectious diseases during the year under review were fairly considerable, mainly due to the fact that the district shared with the county in an outbreak of measles in the middle two quarters of the year. Reference is made later in the report to the small pox and poliomyelitis epidemics which occurred in the country.

Finally, I would refer to the illness affecting pupils at Welshpool Secondary Modern School early in 1961, since a number of these pupils are drawn from the Forden Area. In February, 92 pupils (boys and girls) were stricken by sickness and giddiness and in some cases appeared to "collapse" completely. At first it was not possible to ascribe the illness to any specific cause, and after intensive investigations of cases, contacts and premises the advice of the Pathologist, County Analyst, The Coal Board The Gas Board and County Surveyor's Department was sought. The sewerage system, water supply and school canteen staff and equipment were inspected, as also the "alleged" previously known presence of "Marsh Gas". All results proved negative. At this stage, the advice of the Welsh Board of Health was sought and all previous tests were verified and were again found to be negative.

The affected cases were excluded from school and the crisis ceased. A report from Dr. Baird (the Official from the Welsh Board of Health who visited the school) subsequently revealed that similar incidents had occurred in schools elsewhere in the country where no cause was found.

It was thought that, originally a true case of fainting had occurred in a class room which was over-heated, and that the mere fact that "insensible bodies" were seen to be carried along the corridors precipitated in the closed community a state of "Mass Hysteria".

It is interesting to note that not a single member of the staff, or investigators (including myself) who spent much time on the premises, were affected. Also, the cases were well at home and no members of their families were taken ill with similar symptoms. In the absence of chemical and bacteriological proof, the afore-mentioned diagnosis of "Hysteria" was made.

In conclusion, I would like to thank Mr. Sleigh, the Surveyor and Public Health Inspector for preparing and commenting upon that part of the report relating to the Sanitary Circumstances of the area. My thanks are also due to his staff for their assistance and co-operation during the year, and also to the Clerk, Mr. Davies and his staff.

I am, Sirs,

Your obedient Servant,

Elinor M. Greville.

August 12th 1962.

Section A.

GENERAL STATISTICS OF THE AREA.

Area of District - 49774 acres.
 Estimated Mid Year population - 5170.
 Number of Inhabited houses according to Rate Books - 1515.
 Rateable Value at 31. 12. 61. - £ 31,879.
 Sum represented by a Penny Rate - £ 124.

VITAL STATISTICS.

POPULATION.

Estimated Mid - 1961.....5,170.
 Estimated Mid - 1960.....5,230.
 Estimated Mid - 1959.....5,220.

BIRTHS AND DEATHS.

BIRTHS Total (Live and Stall) :- 95.

Live Births.

	<u>Male</u>	<u>Female</u>	<u>Total.</u>
Legitimate	43.	43.	86
Illegitimate.	4.	3.	7.
Total.	47.	46.	93

Live Births Rate per 1,000 population (Crude) 17. 99

Live Births Rate per 1,000 population (Adjusted) 19. 96.

Illegitimacy Rate per cent of total live births :- 7.4

The adjusted Birth Rate compares favourably with the figures for both Montgomeryshire and England and Wales.


The 1961 live births were 2 more than in 1960 and stood at the figure of 93. As the number of deaths was 64 the natural increase of the population was 29 i.e. an increase as compared with 1960.

Still Births. - Total 2.

Sex.	Legitimate.	Illegitimate.
Male.	2.	Nil.
Female.	<u>Nil.</u>	<u>Nil.</u>
Total.	2.	Nil.

Percentage of Live Births - 2.2 { Montgomeryshire : 1.8 }
 (England & Wales : 1.87).

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The same number of stillbirths occurred as in 1960, showing the same sex distribution. Both were legitimate stillbirths.

Causes of Stillbirths.

<u>Cause.</u>	<u>Sex.</u>	
1. Anencephalitic Faetus. 36 weeks gestation.	Male.	(Born in hospital).
2. Premature, Macerated faetus, extra digits both hands.	Male.	(Born in hospital).

INFANT MORTALITY.

3 deaths of infants occurred under 1 year of age. The causes by age and sex distribution were as follows:-

<u>Age.</u>	<u>Sex.</u>	<u>Cause.</u>
4 months.	Male.	Bronchitis of infancy.
1 day.	Male.	Prematurity *
3 days.	Male.	Prematurity *

* Both these deaths occurred in hospital.

Total Infant Mortality Rate (deaths under 1 year) - 32.3 per 1,000 live births.

Legitimate Infant Mortality Rate - 2,32 per cent of total legitimate live births

Illegitimate Infant Mortality Rate - 14.2 per cent of total illegitimate live births.

Neo-natal Mortality Rate. - (Deaths under 4 weeks) 21,5 per 1,000 live births.

Perinatal Mortality Rate. - (i.e. Stillbirth and first week deaths
per 1,000 total live and stillbirths)
- 42.1 per 1,000 total live and stillbirths.

2 stillbirths and the deaths of 2 infants under 1 week of age gave rise to this high perinatal rate. Prematurity was the cause of both neonatal deaths and the cause of the stillbirths.

This rate was lower than in 1960. The rate (in 1961) for the whole country remained high and the Central Health Services Council, Ministry of Health, in its report (1961) stated that the same general causes are responsible for both Still-births and Neonatal deaths. Prematurity plays a large part in this and nothing is at present known about 50% of premature labours; the commonest cause being disorders of the respiratory system congenital malformations, and haemorrhage into the brain. The survival rate of premature infants is directly proportional to the birth weight. Obstetric and Paediatric research now aims to reduce this incidence of prematurity and promote further the care of the premature infant. The Council considered that measures should be taken to integrate all aspects of hospital and home care and to further an effective system of after care wherein the family doctor, the health visitor, the obstetrician, the paediatrician, and the local health authority Medical Officers should be co-ordinated to supervise this care over several years.

MATERNAL MORTALITY - Nil.

DEATHS

Males.....39
Females.....25.
Total.....64.

Death Rate - per 1,000 estimated population (Crude) 12.38

Death Rate - per 1,000 estimated population (Adjusted)10.52

COMPARATIVE STATISTICS - 1961.

	Forden R.D.C.	Monts.	Eng. & Wales.
Birth Rate (adjusted).	19.96	15.3	17.4
Death Rate (adjusted).	10.52	11.85	12.0
Infant Mortality Rate.	32.3	13.4	21.4
Neonatal Mortality Rate.	21.5	-	15.5
Stillbirth Rate.	22.0	17.77	18.7
Perinatal Mortality Rate.	42.1	-	-

The England and Wales Birth Rate is the highest since 1948 and the Forden Rural District rate compares most favourably. The Infant Mortality Rate (England and Wales) is the lowest ever recorded in this country.

The following table shows the causes of death according to age and sex distribution.

CAUSES OF DEATH BY AGE AND SEX DISTRIBUTION.

Cause	Sex.	0-	30-	40-	50-	60-	70-	80-	90-	Total.	
		1	40	50	60	70	80	90	100	M.	F.
Malignant neoplasm of stomach.	M.	-	-	-	-	2	-	1	-	3	-
	F.	-	-	-	-	-	1	-	-	-	1
Other Malignant neoplasms.	M.	-	-	1a	-	-	1b1c	-	-	3	-
Diabetes.	M.	-	-	-	-	-	1	-	-	1	-
	F.	-	-	-	-	1	-	-	-	-	1
Vascular lesions of Central Nervous System.	M.	-	-	-	-	1	1	2	-	4	-
	F.	-	-	-	-	2	3	3	-	-	8
Coronary Disease	M.	-	-	1	-	2	4	-	-	7	-
Angina.	F.	-	-	1	-	2	1	-	-	-	4
Hypertension with heart disease.	M.	-	-	-	-	1	-	-	-	1	-
Other heart disease.	M.	-	-	-	-	1	3	1	1	6	-
	F.	-	-	-	-	-	1	4	1	-	6
Other circulatory disease.	M.	-	-	-	1d	-	-	-	-	1	-
	F.	-	-	-	-	1e	1	-	-	-	2
Influenza.	M.	-	-	-	-	1	-	-	-	1	-
Bronchitis.	M.	1m	-	-	-	1	-	-	-	2	-
Ulcer of Stomach.	F.	-	-	-	-	-	1	-	-	-	1
Enteritis.	M.	-	-	-	-	1	-	-	-	1	-
Nephritis & Nephrosis.	M.	-	-	-	-	1	1	-	-	2	-
Hyperplasm of Prostate.	M.	-	-	-	-	-	-	1	-	1	-
Other defined and ill-defined diseases.	M.	-	1f	-	1g	-	-	-	-	2	-
All other accidents.	M.	-	-	-	-	1h	1k	-	-	2	-
	F.	-	-	-	-	-	-	1i	1j	-	2
Pregnancy childbirth and Abortion.	M.	2l	-	-	-	-	-	-	-	2	-
	M.	3	1	2	2	12	13	5	1	39	-
Totals.	F.	-	-	1	-	6	8	8	2	-	25
GRAND TOTAL	M & F.	3	1	3	2	18	21	13	3	64	

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- a. Cancer of bladder.
- b. Cancer of prostate.
- c. Cancer of oesophagus.
- d. Pulmonary embolism.
- e. Pulmonary embolism.
- f. Epilepsy.
- g. Dissecting aneurysm of aorta.
- h. Asphyxia due to accidental fall into river.
- i, j, & k. Fracture of femur.
- l. Prematurity (discussed previously).
- m. Bronchitis in infant 4 months age.

Chief causes of death:

1. Heart Disease. - 50% of these deaths were due to coronary disease; males predominated.

2. Vascular lesions of the central nervous system, mainly affecting females in 60-90 age group.

3. Malignant disease. - of the 7 deaths, 4 were due to cancer of the stomach alone, again affecting the 60-90 years age group. 3 were males and 1 a female.

Noticeably, there were no deaths from cancer of the lung at a time when the England and Wales cancer death rate again increased from this cause.

COMPARATIVE STATISTICS.

Forden Rural District 1948 - 1961.

Year.	Popu lation.	Crude Birth Rate.	Still Birth Rate.	Crude Death Rate.	Neonatal Mortality Rate.	Infant Mortality Rate.	Perinatal Mortality Rate.						
Average for													
1948-57	5065	17.7	15.8	17.7	22.8	12.2	11.5	-	-	33.6	27.7	NIL	37.5
1958.	5220	17.43	16.4	32	21.6	14.94	11.7	-	-	11	22.6	42.55	35.1
1959.	5220.	17.82	16.5	32.2	20.7	11.69	11.6	-	-	NIL	22.0	31.25	34.0
1960.	5230.	17.38	17.1	21.46	19.8	12.42	11.5	-	-	22.0	22.0	21.53	32.9
1961.	5170	17.99	17.4	22.0	18.7	12.38	12.0	21.5	15.5	32.3	21.4	42.1	-

Note - the second set of figures refers to England and Wales.

SECTION B.

The County Medical Officer of Health is responsible for the arrangements dealing with the Personal Health services of the area.

SECTION C.(1) WATER

The Montgomeryshire Water Board took over responsibility for water supplies on the 1st April but the Council continued to administer the services for the remainder of the year on an agency basis.

Apart from the Council's Housing Sites the only parts of the district where there are water mains is Berriew Village, Churchstoke Village and the short length of road in Castle Cacreinion parish. Throughout the remainder of the district the need for mains water is urgent and, as in previous years, slum clearance and housing development has been delayed because of this need.

The Council's Comprehensive Scheme to supply water throughout the district received some measure of approval from the Ministry before it was taken over by the Board and it was expected that work would have started on some part of it.

The integration of this scheme with other schemes in the County gave rise to some difficulties with the result that, although progress has been made by the Board in the preparation of schemes to serve this area, the district is still largely without public supplies.

The preparation of schemes and negotiations by this Council have been in progress for at least sixteen years. The district has been most unfortunate in the difficulties and obstacles encountered during this long period and it is still hoped that a water supply will become available, at least in parts of the district in the not too distant future.

No serious difficulties were experienced in the small areas served with water except at Abermule. This supply to four Council Houses failed several times. During the year negotiations were opened with the owner of the supply with a view to the Council taking over the plant and pipe line.

Sampling. The following samples were taken.

Satisfactory samples from Board supplies 29.
Unsatisfactory samples from Board supplies. 6.

Of the unsatisfactory samples four were during the period immediately after a chlorination plant had been installed at Churchstoke and subsequent samples were satisfactory. Two were individual supplies to Council Houses that have been supplied with filters for drinking purposes.

Satisfactory samples from private supplies 3.
Unsatisfactory samples from private supplies. 27.

Advice has been given in each case.

(2) Drainage & Sewerage.

A scheme is still in course of preparation for sewerage to Berriew Village. During the year it was possible to reach agreement as to the land requirements and with the Parish Council as to layout.

Complaints were received from the Severn River Board as to the quality of the effluent from three Council House sewage treatment plants. After cleaning and overhauling the plants the effluents proved satisfactory.

(3) Rivers and Streams.

No action other than the above was taken during the year.

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(4) Public Cleansing

Refuse collection is made fortnightly throughout the district. Disposal is by tipping at Churchstoke and Bulthy Hill.

Cesspool emptying is done by private contractors.

(5) Public Health Inspection.

Inspections were made on complaint and systematically-no formal action was necessary.

(6) Shops and Offices.

All shops and offices were inspected and no action was necessary.

(7) Camping Sites.

There are a few individual caravans sited singly, some used as residences. There are three sites for holiday caravans. All conform with the regulations and no action was necessary. Fourteen sites are registered.

(8) Smoke Abatement.

There were no smoke nuisances during the year.

(9) Swimming Baths.

There are none in the district.

(10) Vermin.

A rodent operative is employed jointly by three authorities.

No. of inspections made.	-	956.
No. of farms treated.	-	128.
No. of business premises treated.	-	42.
No. of private premises treated.	-	85.
No. of times tips treated.	-	1.

Materials used.

Sausage Rusk - 896 lbs.	Oatmeal - 280 lbs.
Sorex 1, -14lbs. 11 ozs.	Zinc Phosphide - 20lbs. 10 ozs.
Antu - 2 lbs. 14 ozs.	

SECTION D HOUSING

Number of dwellings rendered fit in consequence of informal action by the Local Authority or their officers.	- 9
Number of dwellings built by Local Authority.	- Nil
" " " " " private enterprise.	- 5
" " " improved by Standard Grants.	- 3
" " " " Discretionary Grants.	- 9
" " " in respect of which Closing Orders were made the house being unfit for habitation.	- 2

No statutory notices were served under the Public Health and Housing Acts other than the above.

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Factories.

Inspections for purposes of provisions as to health.

<u>Premises.</u>	<u>No. on Register.</u>	<u>Inspections.</u>	<u>Written Notices.</u>
(1) Factories in which Sec. 1-6 are to be enforced by Local Authorities.	9	7	-
(2) Factories not included in (1) above in which Sec.7 is enforced by the Local Authority.	17	4	-
(3) Other premises in which Sec.7 is enforced by Local Authority.	-	-	-
Total.	26	11	-

No defects were found necessitating any action.

There are no outworkers in the district.

SECTION E.

Premises.

Sixteen food premises have been inspected and are satisfactory.

Milk.

There are no dairies selling milk by retail. Producer retailers are inspected by the Ministry.

Meat.

There are no slaughterhouses in the district. The delivery vans selling meat were inspected and found satisfactory.

INFECTIOUS DISEASE CONTROL.

During 1961, 89 cases of infectious disease were notified in the district. They were distributed as follows:-

Measles	-	64.
Whooping Cough	-	16.
Scarlet Fever	-	4
Tuberculosis.	-	2
Acute Pneumonia	-	2
Meningitis.	-	1

Total. - 89.

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The Following table shows the age, sex, and seasonal distribution of the cases :-

<u>Age.</u>	<u>Measles.</u>						<u>Totals. M. and F.</u>		
	<u>Males</u>			<u>Females.</u>			<u>Quarters.</u>		
	<u>1</u>	<u>2</u>	<u>3</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>1</u>	<u>2</u>	<u>3</u>
0-1 years.	-	-	-	1	-	-	-	1	
1-2 years.	-	1	2	-	-	-			3
2-3 years.	-	1	2	-	1	4			7
3-4 years.	-	1	1	-	-	3			5
4-5 years.	1	1	2	-	-	1			4
5-9 years.	-	7	11	1	5	15			39
10-14 years.	-	-	2	-	-	1			3
15-24 years.	-	-	2	-	-	-			2
Totals.	1	9	22	2	6	24			64.

The epidemic of measles reached its peak in the 3rd quarter of the year, affecting mainly the 5-9 years group; this picture was repeated in the neighbouring districts. No deaths or serious complications occurred.

Whooping Cough.

The 16 cases were not of a serious nature and in 10 instances immunization had not been carried out; in 4 further cases the injections had not been completed.

Meningitis.

A male aged 27 years was allegedly affected and admitted to hospital - the diagnosis originally made was not confirmed. No action was required.

Tuberculosis.

2 new cases were notified, the first was a male aged 53 years, a farmer who had contracted pulmonary tuberculosis. He was admitted to hospital and the premises were subsequently disinfected.

The second case was that of a male, aged 14 years, who developed a "cold abscess" of the chest wall. The boy was a scholar and was admitted to hospital for treatment.

There were no deaths from this disease during the year.

In the preventive field, the B.C.G. vaccination of school-leavers continued in the Welshpool High and Secondary Schools, where 142 pupils were tested; 106 were found to require vaccination and 97 accepted.

The Mass Radiography Unit made 14 visits to Welshpool to the fixed location and also carried out several special surveys (only in the Welshpool Borough). At the fixed location centre 277 people were examined, and 10 of these were found to have chest abnormalities, 3 requiring further investigation at the Chest Clinic.

DETAILS OF ABNORMALITIES FOUND.

Healed post primary tuberculosis.....	7
Abnormalities of the bony thorax and soft tissues.....	1
Bacterial, Virus & other infections of the Lung.....	1
Pleural thickening or calcification.....	<u>1</u>
Total.....	<u>10.</u>

Mass Radiography discloses, in the country as a whole, a large number of persons with unsuspected active disease who still require treatment, and a recent report on Mass Radiography (1961) suggests that 17% of children have acquired tuberculosis infection by the age of 13 years; hence it is of the utmost importance that the public utilize the services of this unit.

Poliomyelitis.

Vaccination continued to be offered to persons under 40 years of age and older people at special risk. Fourth injections are now being given to all children prior to school entry, or as soon as possible after this date. Consequent upon the epidemic spread of the disease in Kingston-upon- Hull in October (when oral vaccine was used to contain the outbreak) the numbers attending the clinics rose appreciably, and many were the requests for the " oral type of vaccine", but the County Health Authority had not then decided to use it. Nevertheless, at the time of going to press, there is every reason to believe that it may be obtainable in the near future.

Fortunately for the country, by September 30th 1961, over 16 million people in England and Wales had been given at least 2 injections of vaccine, and 12 $\frac{1}{2}$ million had been given at least 3. More than 8 out of every 10 children under 18 years had been immunized and 6 out of every 10 people between 18 - 28 years.

Smallpox

In September 1961 a suspected case of smallpox arrived in England on a cross channel boat; a contact visited the district of North Montgomeryshire and was kept under daily supervision by me until notice was received that the suspected case was negative.

In December, as the result of the importation of a case (confirmed) to Birmingham, the district once more received a " contact" He had been vaccinated but was kept under my personal supervision daily for several days. He did not contract the disease, but had he done so, one wonders whether the local population would have been sufficiently protected by previous vaccination at that stage, to stay an epidemic such as ultimately occurred in other parts of the Country. Parents attending the Welfare Clinics have always been and are still being advised to have their babies vaccinated against smallpox prior to immunization against diphtheria, tetanus and whooping cough.

